## ANNEXURE A

## EQUESTRIAN SA INC

**ELECTED DIRECTOR NOMINATION FORM**

**NOMINATION:**

We the undersigned proposers, being members of EQUESTRIAN FEDERATION OF AUSTRALIA- SOUTH AUSTRALIAN BRANCH INCORPORATED trading as Equestrian SA Incorporated (Association) hereby nominate the person listed below as a candidate for election as an Elected Director of the Association, at the election to be held at the Annual General Meeting of the Association, at 7.30pm on 18th September 2019 at the at the Robert Charles room, Auchendarroch House, 17 Adelaide Road, Mount Barker, commencing 7:30pm (AGM)

SIGNED by Proposer Signed by Seconder

Name of Proposer Name of Seconder

Date: Date:

Membership Number: Membership Number:

## CONSENT:

I, the undersigned nominee, being a member of the Association entitled to vote at general meeting, hereby consent to my nomination as a candidate for election as an Elected Director of the Association at the AGM.

**SIGNED** by Nominee:

Signature of nominee

Name of Nominee (Please Print)

Date

## Board Nomination Resume Template

For use by members nominated to fill a vacancy on the Board of Equestrian SA Incorporated.

|  |  |
| --- | --- |
| **Full Name** |  |
| **Address** |  |
| **Tel. No** |  | **Fax No** |  |
| **Mobile** |  | **Email** |  |

## Board Nomination Resume Template

For use by members nominating to fill a vacancy on the Board of Equestrian SA Incorporated.

Nominees for election to the Equestrian SA Board must use this template to give information on their background and their commitment to serve on the Board. The total amount of information (excluding personal details) should not exceed 400 words.

**The resume template will be distributed to all members entitled to vote**.

No other documentation will be distributed.

|  |  |
| --- | --- |
| **Name:** |  |
| **Residential Location:** |  |
| **Training & Education** |  |
| **Sport Governance Skills and Experience** |  |

|  |  |
| --- | --- |
| **Sport Knowledge and Involvement** |  |
| **Business and Related Skills and Experience** |  |
| **Other Relevant Information** |  |
| **How much time are you willing to dedicate to Director’s duties?** (E.g. Review of documentation for the Board, Board Committee membership and the work that flows from it; financial analysis; formulation of plans and policies; etc.) |  |
| **Date** | **Signature** |